



City of St. Louis Department of Health (DOH)

FY 2019

Contract Period:

July 1, 2018 through June 30, 2019

(Base year plus 4 renewal option years)

Based on Budget Availability

REQUEST FOR PROPOSALS

APPLICATION MATERIALS

FOR

Sexually Transmitted Infection (STI) Testing/Treatment Services

RFP OPENING DATE: January 22, 2018

RFP CLOSING DATE: February 26, 2018

City of St. Louis Department of Health

1520 Market Street, Room 4027

St. Louis, MO 63103

(314) 657-1461

ESTIMATED SCHEDULE:

Date/Time	Activity
Monday January 22, 2018	Request for Proposal Released
Monday January 29, 2018	Deadline for Bidder's Pre-Application Conference Questions
Monday February 5, 2018 2-3pm	Mandatory Bidder's Pre-Application Conference
Monday February 26, 2018 5pm	Due Date of Application: NO EXCEPTIONS
April 19, 2018 2pm	Selection by Professional Services Agreement Committee
TBD	Notification of Award (Based on FY 19 budget)
July 1, 2018	Contract Start Date
June 30, 2019	Contract End Date

Note: If this RFP was downloaded from the City of St. Louis RFP Website each applicant must provide contact information to the RFP contact person in order to be notified of any changes in this RFP document.

I. APPLICATION FORMATTING REQUIREMENTS

Request for Proposals (RFP) may be obtained beginning January 22, 2018 from Franda Thomas at the City of St. Louis Department of Health, 1520 Market Street, Suite 4027, St. Louis, MO 63103, or downloaded from the St. Louis City website at <http://stlouis-mo.gov/>, or by contacting Franda Thomas at thomasf@stlouis-mo.gov or (314) 657-1461.

All questions must be submitted in writing no later than January 29, 2018 to Franda Thomas, City of St. Louis Department of Health, 1520 Market Street, Suite 4027, St. Louis, MO 63103 by contacting her at thomasf@stlouis-mo.gov or at (314) 657-1461. All questions will be addressed through addenda posted on the St. Louis City website at <http://stlouis-mo.gov/>.

An original, five (5) paper copies and a USB flash drive containing a copy of the proposal in Microsoft Word and PDF format must be submitted to Franda Thomas at the address above by February 26, 2018 by **5:00 p.m. *Late or incomplete proposals will not be accepted.*** Proposers must adhere to the following:

- Applications must be in English
- Five (5) copies must be submitted
- Use 12-point font
- Use 8.5 inch by 11 inch white paper that can be photocopied
- A flash drive must be properly formatted and be able to be read by DOH computers using Microsoft Word 97 or higher

II. SCOPE OF SERVICES

1. Provide testing and treatment of Gonorrhea, Chlamydia, and Syphilis for persons who have no other payer sources. Syphilis testing includes RPR and confirmatory testing. Offer HIV testing according to CDC guidelines for HIV testing. These CDC guidelines are available at www.cdc.gov/hiv/guidelines.
2. Follow most recent CDC recommendations as defined in the Centers for Disease Control and Prevention Sexually Transmitted Diseases Treatment Guidelines 2015, MMWR 2015; Vol.64 (No. 3). These guidelines can be found at www.cdc.gov/STD/treatment.
3. Provide expedited partner therapy according CDC guidelines (www.cdc.gov/std/ept/gc-guidance) or provide appropriate referrals for expedited partner services according to CDC guidelines.
4. According to CDC guidelines, administer or refer clients for pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP) services. These guidelines are available at www.cdc.gov/hiv/pdf/prepguidelines2014.
5. Monthly, no later than the 15th of the following month of service, provide a metric report for quality assurance and performance documentation purposes to the City of Saint Louis Department of Health Communicable Disease Bureau Chief. Documents may be emailed (thomasf@stlouis-mo.gov), or mailed in a confidential manner that requires signature of the receiving authority.
6. Monthly, as needed, meet with City of St. Louis Department of Health Bureau Chief and attend community meetings pertaining to the treatment and care efforts of STIs in the St. Louis Region such as STIRR (STI Regional Response).

7. Monthly, no later than the 15th of the following month of service submit your invoice to the City of Saint Louis Department of Health Communicable Disease Bureau Chief. Documents may be emailed (thomasf@stlouis-mo.gov), or mailed in a confidential manner that requires signature of the receiving authority.
8. Ensure medical providers working in your facility attend the annual STI and HIV care refresher course provided by the Saint Louis STD/ HIV Prevention Training Center. Also, as needed, seek training and medical guidance through the Saint Louis STD/ HIV Prevention Training Center.

Contractor Qualifications

This RFP is open to organizations and agencies who are tax-exempt, nonprofit Community Based Organizations (CBO's) and/or who provide testing and treatment for sexually transmitted infections (chlamydia, gonorrhea, syphilis) and referral services for HIV prevention (PrEP, PEP) and treatment if those services are not provided by medical providers working in your facility. Contractor should also offer HIV testing according to CDC guidelines for HIV testing.

III. Project Abstract Maximum two (2) single-spaced pages

1. Describe the organization's overall mission and scope of services.
2. Describe the organization's ability to service low-income City residents and identify matching funds that can be allocated to meet the deliverables.
3. Describe the organization's experience in providing similar services you are proposing from section II. Provide specific experience in **last three (3) years** in carrying out activities related to assisting the City of St. Louis with STI testing and treatment services.
4. Identify community partners that you have worked with in the **last three (3) years**.
5. Describe the organization's current patient volume and access point(s).

V. FEES

The City of St. Louis Department of Health is proposing a value based reimbursement model for the STI RFP. Please propose reimbursement costs in your budget.

VII. CONTENTS OF PROPOSAL

Each proposal must contain at a minimum, the following:

1. An abstract expressing interest in the services as applicable to Section II as well as a Program narrative (Program narrative should be a **minimum** of 10 (ten) pages, 2.0-spaced typewritten pages and a **maximum** of twenty-five (25), 1.5-spaced typewritten pages)
2. A document(s) that provides the following information:
 - A. Evidence of licensure that the facility and staff are licensed through the appropriate medical boards for the contract period
 - B. The address, phone number and facsimile number of the Respondent;
 - C. Any additional information relevant to Respondent's qualifications for the position or

- pertinent to the selection criteria identified in Section IX below;
- D. The name, address and telephone number of two references. If the reference is a business, corporation or other organization, please identify the contact person.
 - E. A statement of M/WBE and/or DBE participation.

VIII. SELECTION COMMITTEE

A Selection Committee composed of the Director of the Health Department or her designee, an employee of the Health Division, a representative of the Mayor, a representative of the President of the Board of Alderman, and a representative of the Comptroller will perform the evaluation of the proposals.

IX. SELECTION CRITERIA

The Selection Committee shall consider, at minimum, the following:

1. Specialized experience, qualification and technical competence of the Respondent, its principals and key staff;
2. The capacity and capability of the Respondent to perform the work with required time limitations set by the Department of Health;
3. Past record and performance of the Respondent with respect to scheduled compliance, cost control and quality of work;
4. Commitment, connection and proximity of the Respondent to the City of St. Louis;
5. M/WBE and/or DBE participation;
6. Ability of the Respondent to meet statutory or ordinance requirements;
7. Other items that arise as the result of the proposal or interview.

X. MISCELLANEOUS

1. The City of St. Louis is seeking to enter into a five (1) year contract (base year plus 4 renewal options), with the City reserving the right to terminate upon thirty (30) days' notice, with or without cause, by submitting written notice. The City reserves the right to renew the contract for additional annual one-year terms for up to five years.
2. The successful bidder(s) shall pay all applicable taxes to the City of St. Louis.
3. It is understood and agreed that the contract is subject to appropriation and availability of funds.
4. All materials submitted in accordance with this RFP will become and remains the property of the City and will not be returned. All Proposals shall be considered public records, but may be deemed and treated as closed or exempt by the Department of Health, at the sole discretion of the Department of Health, pursuant to the City's understanding and interpretation of the laws of the State of Missouri. The City cannot guarantee confidentiality of any materials during the evaluation process or at any other time. Thus, proposals and communications exchanged in response to this RFP should be assumed to be subject to public disclosure.
5. The City reserves the right to reject any or all bids or to seek additional bids.
6. The City reserves the right to cancel or withdraw this RFP without the substitution of another RFP.
7. The City reserves the right to interview one or more of the Respondents.
8. The City reserves the right to negotiate a contract with one or more Respondents.
9. The City reserves the right to waive any and/or all non-material irregularities pertaining to the submission of the proposal.
10. DOH reserves the right to reject any and all proposals submitted; to select one or more respondents; to void this RFP and the review process and/or terminate negotiations at any time; to select separate respondents for various components of the scope of services; to select final team members from among the proposals received in response to this RFP. Additionally, any and

all RFP projects elements, requirements and schedules are subject to change and modification. DOH also reserves the unqualified right to modify, suspend, or terminate at its sole discretionary and all aspect of their RFP process, to obtain further information from any and all respondents, and to waive any defects as to form or content of the RFP or any responses by any organization/business. Proponents may be asked to make one or more presentations and participate in interviews.

APPLICATION COVER SHEET

**City of St. Louis Department of Health
1520 Market Street, Room 4043
St. Louis, MO 63103
(314) 657-1507**

Sexually Transmitted Infection (STI) Testing/ Treatment Services

FY 2019

Contract Period:

July 1, 2018 through June 30, 2019

(Base year plus 4 renewal option years)

Based on Budget Availability

Program/Organization Name: _____

Contact and Address: _____

Telephone #: _____ **Fax:** _____

Email Address: _____

LIVING WAGE ADJUSTMENT BULLETIN

NOTICE OF ST. LOUIS LIVING WAGE RATES EFFECTIVE APRIL 1, 2016

In accordance with Ordinance No. 65597, the St. Louis Living Wage Ordinance (“Ordinance”) and the Regulations associated therewith, the City Compliance Official for the City of St. Louis has determined that the following living wage rates are now in effect for employees of covered contracts:

- 1) Where health benefits as defined in the Ordinance are provided to the employee, the living wage rate is **\$12.60** per hour (130% of the federal poverty level income guideline for a family of three); and
- 2) Where health benefits as defined in the Ordinance are not provided to the employee, the living wage rate is **\$16.87** per hour (130% of the federal poverty level income guideline for a family of three, plus fringe benefit rates as defined in the Ordinance).
- 3) Wages required under Chapter 6.20 of the Revised Code of the City of St. Louis: **\$4.27** per hour.

These rates are based upon federal poverty level income guidelines as defined in the Ordinance and these rates are effective as of **April 1, 2016**. These rates will be further adjusted periodically when the federal poverty level income guideline is adjusted by the U.S. Department of Health and Human Services or pursuant to Chapter 6.20 of the Revised Code of the City of St. Louis.

The Ordinance applies to employers who are covered by the Ordinance as defined in the Ordinance, where the contract or grant is entered into or renewed after the effective date of the Ordinance, which is November 3, 2002. A copy of the Ordinance may be viewed online at <https://www.stlouis-mo.gov/government/city-laws/ordinances/ordinance.cfm?ord=65597> or obtained from:

City Compliance Official
Lambert-St. Louis International Airport
Certification and Compliance Office
P.O. Box 10212
St. Louis, MO 63145
(314) 426-8111

Dated: February 5, 2016

ST. LOUIS LIVING WAGE ORDINANCE

LIVING WAGE ACKNOWLEDGMENT AND ACCEPTANCE DECLARATION

(To be completed by each respondent to a bid/proposal solicitation when that solicitation has included Living Wage Advertisement/Solicitation Language.)

CONTRACTING AGENCY: _____

AGENCY CONTRACT NUMBER: _____

DATE: _____ **PREPARED BY:** _____

PREPARER'S TELEPHONE NUMBER: _____

PREPARER'S E-MAIL ADDRESS: _____

PREPARER'S CELL PHONE NUMBER: _____

PREPARER'S ADDRESS AND ZIP CODE: _____

As the authorized representative of the above-referenced bidder or proponent, I hereby acknowledge that the bidder/proponent understands that the contract or agreement that will be executed with a successful bidder/proponent pursuant to this solicitation is subject to the St. Louis Living Wage #65597 and the Regulations associated therewith. The bidder/proponent hereby agrees to comply with the Ordinance and the associated Regulations if awarded a contract pursuant to this solicitation. I am authorized to make the above representations on behalf of the bidder or proponent.

AUTHORIZED REPRESENTATIVE CERTIFICATION:

SIGNATURE: _____

NAME: _____

TITLE: _____

DATE: _____